

Fill in this information to identify the case:

Debtor name L&L Wings, Inc.

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK

Case number (if known) 21-10795

☐ Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ Amended Schedule
- ☐ Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders (Official Form 204)
- ☐ Other document that requires a declaration

I declare under penalty of perjury that the foregoing is true and correct.

Executed on May 24, 2021

X /s/ Ariel Levy

Signature of individual signing on behalf of debtor

Ariel Levy

Printed name

President

Position or relationship to debtor

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United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK
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Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. **Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

1a. Real property: Copy line 88 from <i>Schedule A/B</i>	\$	<u>0.00</u>
1b. Total personal property: Copy line 91A from <i>Schedule A/B</i>	\$	<u>13,095,271.17</u>
1c. Total of all property: Copy line 92 from <i>Schedule A/B</i>	\$	<u>13,095,271.17</u>

Part 2: Summary of Liabilities

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i>	\$	<u>19,114,263.60</u>
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)		
3a. Total claim amounts of priority unsecured claims: Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i>	\$	<u>123,441.21</u>
3b. Total amount of claims of nonpriority amount of unsecured claims: Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i>	+\$	<u>32,920,798.18</u>
4. Total liabilities Lines 2 + 3a + 3b	\$	<u>52,158,502.99</u>

Fill in this information to identify the case:

Debtor name L&L Wings, Inc.United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORKCase number (if known) 21-10795☐ Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets - Real and Personal Property

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Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

- ☐ No. Go to Part 2.
☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

3. Checking, savings, money market, or financial brokerage accounts (Identify all)

Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	
3.1. TD Bank	checking - AP controlled disbursement account	7336	\$0.00
3.2. TD Bank	credit card account	9282	\$0.00
3.3. TD Bank	Operating Account	9266	\$787,533.16
3.4. TD Bank	Checking - Vault account	0540	\$0.00
3.5. TD Bank	warehouse account	9290	\$1,298.33
3.6. TD Bank	Checking - Store 205 - Galveston TX	9185	\$2,220.00
3.7. TD Bank	Checking - Store 328 - Miami Beach, FL	9315	\$1,780.00

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3.8.	<u>TD Bank</u>	<u>Checking - Store 606 - Wrightsville Beach, NC</u>	<u>9307</u>	<u>\$660.00</u>
3.9.	<u>TD Bank</u>	<u>checking - store 337 - Sunny Isle Beach, FL</u>	<u>7344</u>	<u>\$480.00</u>
3.10.	<u>TD Bank</u>	<u>checking - store 306 - Hollywood Beach, FL</u>	<u>8870</u>	<u>\$1,180.00</u>
3.11.	<u>TD Bank</u>	<u>checking - store 329 - Riviera Beach, FL</u>	<u>5947</u>	<u>\$80.00</u>
3.12.	<u>TD Bank</u>	<u>checking - store 103 - San Diego, CA</u>	<u>7191</u>	<u>\$300.00</u>
3.13.	<u>TD Bank</u>	<u>checking - store 035 - Murrells Inlet, SC</u>	<u>9382</u>	<u>\$10.00</u>
3.14.	<u>TD Bank</u>	<u>checking - store 302 - Clearwater FL</u>	<u>9323</u>	<u>\$523.00</u>

4. **Other cash equivalents (Identify all)**

4.1.	<u>Cash on hand</u>	<u>\$136,868.89</u>
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5. **Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$932,933.38

Part 2: Deposits and Prepayments

6. **Does the debtor have any deposits or prepayments?**

- ☐ No. Go to Part 3.
☒ Yes Fill in the information below.

7. **Deposits, including security deposits and utility deposits**

Description, including name of holder of deposit

7.1.	<u>Various security deposits with landlords and utilities as of 3/31/21</u>	<u>\$345,909.25</u>
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8. **Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**

Description, including name of holder of prepayment

8.1.	<u>Prepayments</u>	<u>\$5,547.68</u>
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9. **Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

\$351,456.93

Part 3: Accounts receivable

10. Does the debtor have any accounts receivable?

- ☒ No. Go to Part 4.
☐ Yes Fill in the information below.

Part 4: Investments

13. Does the debtor own any investments?

- ☒ No. Go to Part 5.
☐ Yes Fill in the information below.

Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

- ☐ No. Go to Part 6.
☒ Yes Fill in the information below.

	General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19.	Raw materials				
20.	Work in progress				
21.	Finished goods, including goods held for resale Inventory (including 263A)	monthly cycle counts	\$0.00	Recent cost	\$7,953,908.16
22.	Other inventory or supplies Various		Unknown	Recent cost	\$519,003.06

23. **Total of Part 5.**

Add lines 19 through 22. Copy the total to line 84.

\$8,472,911.22

24. Is any of the property listed in Part 5 perishable?

- ☒ No
☐ Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

☐ No
☒ Yes. Book value **1,615,209.00** Valuation method **cost** Current Value **1,615,209.00**

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.

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☐ Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

☐ No. Go to Part 8.
☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39.	Office furniture 1 postage machine	\$0.00		Unknown

40. **Office fixtures**

41. **Office equipment, including all computer equipment and communication systems equipment and software**

42. **Collectibles** *Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

43. **Total of Part 7.**
Add lines 39 through 42. Copy the total to line 86.

\$0.00

44. **Is a depreciation schedule available for any of the property listed in Part 7?**

☒ No
☐ Yes

45. **Has any of the property listed in Part 7 been appraised by a professional within the last year?**

☒ No
☐ Yes

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

☐ No. Go to Part 9.
☒ Yes Fill in the information below.

	General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47.	Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
47.1.	Assorted vehicles (net of depreciation)	\$141,274.85	Tax records	\$141,274.85

48. **Watercraft, trailers, motors, and related accessories** *Examples:* Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels

49. **Aircraft and accessories**

50. **Other machinery, fixtures, and equipment (excluding farm machinery and equipment)**

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**Plant and building equipment, machiney and
leasehold improvements (net of depreciation)
as of 3/31/21**

\$3,001,113.73

\$3,001,113.73

51. **Total of Part 8.**

Add lines 47 through 50. Copy the total to line 87.

\$3,142,388.58

52. **Is a depreciation schedule available for any of the property listed in Part 8?**

☐ No

☒ Yes

53. **Has any of the property listed in Part 8 been appraised by a professional within the last year?**

☒ No

☐ Yes

Part 9: Real property

54. **Does the debtor own or lease any real property?**

☒ No. Go to Part 10.

☐ Yes Fill in the information below.

Part 10: Intangibles and intellectual property

59. **Does the debtor have any interests in intangibles or intellectual property?**

☐ No. Go to Part 11.

☒ Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets Registered trademarks: 3458144 4193883 85489630	\$0.00		Unknown

61. Internet domain names and websites Various URL domains	\$0.00		Unknown
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62. **Licenses, franchises, and royalties**

63. **Customer lists, mailing lists, or other compilations**

64. **Other intangibles, or intellectual property**

65. **Goodwill**

66. **Total of Part 10.**

Add lines 60 through 65. Copy the total to line 89.

\$0.00

67. **Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107?**

☒ No

☐ Yes

68. **Is there an amortization or other similar schedule available for any of the property listed in Part 10?**

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- ☒ No
☐ Yes

69. **Has any of the property listed in Part 10 been appraised by a professional within the last year?**

- ☒ No
☐ Yes

Part 11: All other assets

70. **Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☐ No. Go to Part 12.
☒ Yes Fill in the information below.

**Current value of
debtor's interest**

71. **Notes receivable**
Description (include name of obligor)

72. **Tax refunds and unused net operating losses (NOLs)**
Description (for example, federal, state, local)

73. **Interests in insurance policies or annuities**

74. **Causes of action against third parties (whether or not a lawsuit
has been filed)**

75. **Other contingent and unliquidated claims or causes of action of
every nature, including counterclaims of the debtor and rights to
set off claims**

Due from related parties

\$78,879.29

Nature of claim	Advances
Amount requested	\$0.00

Due From SIE LLC

\$116,701.77

Nature of claim	Sale of Assets
Amount requested	\$0.00

76. **Trusts, equitable or future interests in property**

77. **Other property of any kind not already listed** Examples: Season tickets,
country club membership

78. **Total of Part 11.**

Add lines 71 through 77. Copy the total to line 90.

\$195,581.06

79. **Has any of the property listed in Part 11 been appraised by a professional within the last year?**

- ☒ No
☐ Yes

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Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	<u>\$932,933.38</u>	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	<u>\$351,456.93</u>	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	<u>\$0.00</u>	
83. Investments. <i>Copy line 17, Part 4.</i>	<u>\$0.00</u>	
84. Inventory. <i>Copy line 23, Part 5.</i>	<u>\$8,472,911.22</u>	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	<u>\$0.00</u>	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	<u>\$0.00</u>	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	<u>\$3,142,388.58</u>	
88. Real property. <i>Copy line 56, Part 9.....></i>		<u>\$0.00</u>
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	<u>\$0.00</u>	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ <u>\$195,581.06</u>	
91. Total. Add lines 80 through 90 for each column	<u>\$13,095,271.17</u>	+ 91b. <u>\$0.00</u>
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		<u>\$13,095,271.17</u>

Fill in this information to identify the case:

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United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK

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Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	
2.1	Crestmark Equipment Finance Creditor's Name 40950 Woodward Ave., #201 Bloomfield Hills, MI 48304 Creditor's mailing address Creditor's email address, if known Date debt was incurred Last 4 digits of account number Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien Safes Describe the lien Equipment Loan Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$68,890.09	Unknown

2.2	Crestmark Equipment Finance Creditor's Name 40950 Woodward Ave., #201 Bloomfield Hills, MI 48304 Creditor's mailing address Creditor's email address, if known Date debt was incurred Last 4 digits of account number Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien Security cameras Describe the lien Equipment Loan Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply	\$68,438.47	Unknown
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Debtor **L&L Wings, Inc.** Case number (if known) **21-10795**
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- ☒ No
☐ Yes. Specify each creditor, including this creditor and its relative priority.
- ☐ Contingent
☐ Unliquidated
☐ Disputed

2.3 South Atlantic Bank Creditor's Name PO Box 70130 Myrtle Beach, SC 29572 Creditor's mailing address Creditor's email address, if known Date debt was incurred Last 4 digits of account number Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien Truck loan Describe the lien Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$28,500.54	Unknown
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2.4 TD Bank, N.A. Creditor's Name 9715 Gate Pkwy North Attn: Charles Flint, Esq. Jacksonville, FL 32246 Creditor's mailing address Creditor's email address, if known Date debt was incurred Last 4 digits of account number Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien All assets Describe the lien Line of Credit Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	Unknown
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2.5 TD Bank, N.A. Creditor's Name Attn: Charles Flint 9715 Gate Pkwy. North Jacksonville, FL 32246 Creditor's mailing address Creditor's email address, if known	Describe debtor's property that is subject to a lien All Assets Describe the lien Corporate Guarantees Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$18,799,627.13	Unknown
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Debtor **L&L Wings, Inc.** Case number (if known) **21-10795**
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Date debt was incurred

Last 4 digits of account number

Is anyone else liable on this claim?
☐ No
☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Do multiple creditors have an interest in the same property?
☒ No
☐ Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:
 Check all that apply
☐ Contingent
☐ Unliquidated
☐ Disputed

2.6 U.S. Bank, N.A. Describe debtor's property that is subject to a lien **\$110,204.05** **Unknown**
 Creditor's Name
Range Rover

P.O. Box 790179
Saint Louis, MO 63179-0179
 Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?
☒ No
☐ Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:
 Check all that apply
☐ Contingent
☐ Unliquidated
☐ Disputed

Describe the lien
Vehicle lien
Is the creditor an insider or related party?
☒ No
☐ Yes

Is anyone else liable on this claim?
☒ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

2.7 United Community Bank Describe debtor's property that is subject to a lien **\$11,139.05** **Unknown**
 Creditor's Name
Truck

Attn: Tony Young
Special Assets Officer
946 Orleans Rd
Charleston, SC 29407
 Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?
☒ No
☐ Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:
 Check all that apply
☐ Contingent
☐ Unliquidated
☐ Disputed

Describe the lien
Vehicle Lien
Is the creditor an insider or related party?
☒ No
☐ Yes

Is anyone else liable on this claim?
☒ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

2.8 United Community Bank Describe debtor's property that is subject to a lien **\$27,464.27** **\$27,464.27**

Debtor L&L Wings, Inc. <small>Name</small> <hr/> Creditor's Name Attn: Tony Young Special Assets Officer 946 Orleans Rd Charleston, SC 29407 <hr/> <small>Creditor's mailing address</small> <hr/> <hr/> <small>Creditor's email address, if known</small> <hr/> Date debt was incurred <hr/> Last 4 digits of account number <hr/> Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority. <hr/>	Truck <hr/> Describe the lien Vehicle Lien Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
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3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.	\$19,114,263. 60
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Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address	On which line in Part 1 did you enter the related creditor?	Last 4 digits of account number for this entity
South Atlantic Bank 630 29th Avenue Myrtle Beach, SC 29577	Line <u>2.3</u>	
Sumimoto Mitsui Finance & Leasing Co. 666 Third Avenue 8th Floor New York, NY 10017	Line <u>2.1</u>	
TD Bank attn: Scott Sharp, SVP 40 Calhoun Street Mount Pleasant, SC 29466	Line <u>2.4</u>	
Theresa Driscoll, Esq. Moritt Hock & Hamroff LLP 400 Garden City Plaza Garden City, NY 11530	Line <u>2.4</u>	
U.S. Bank, N.A. P.O. Box 3427 Oshkosh, WI 54903	Line <u>2.6</u>	

Fill in this information to identify the case:

Debtor name **L&L Wings, Inc.**

United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF NEW YORK**

Case number (if known) **21-10795**

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

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Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.

☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	Priority amount
2.1	<p>Priority creditor's name and mailing address</p> <p>Internal Revenue Service P.O. Box 3000 Church St. Station New York, NY 10008</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ESRP Assessment</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$123,441.21</p> <p>\$123,441.21</p>

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	<p>Nonpriority creditor's name and mailing address</p> <p>100 South Morehead Corp. 666 Broadway, 8th Fl. New York, NY 10012</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>\$96,000.00</p>
3.2	<p>Nonpriority creditor's name and mailing address</p> <p>4 Ocean 3600 Fau Blvd., Ste. 19 Boca Raton, FL 33431</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>\$8,640.00</p>

Debtor	L&L Wings, Inc. Name	Case number (if known)	21-10795
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3.3	Nonpriority creditor's name and mailing address American Express Customer Service P.O. Box 981535 El Paso, TX 79998 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$50,000.00
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3.4	Nonpriority creditor's name and mailing address American Gift Corp. 6600 NW 74th Avenue Miami, FL 33166-2839 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$50,687.00
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3.5	Nonpriority creditor's name and mailing address Amlold Attn: Majorie Rivera 7 Ridgedale Avenue, Ste. 1A Cedar Knolls, NJ 07927 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$17,540.00
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3.6	Nonpriority creditor's name and mailing address Art on T's Inc. 20855 NE 16th Ave., Unit C-40 Miami, FL 33179-2131 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,172.00
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3.7	Nonpriority creditor's name and mailing address Australian Gold of S.W. Florida, Inc. 6278 N. Federal Hwy., Ste. 269 Fort Lauderdale, FL 33308 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,773.00
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3.8	Nonpriority creditor's name and mailing address B&K Trading International LLC 1991 Tigertail Blvd., #A Dania, FL 33004 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,077.00
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3.9	Nonpriority creditor's name and mailing address Ball, Bounce and Sport, Inc. 1 Hedstrom Drive Ashland, OH 44805 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,413.00
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Debtor	L&L Wings, Inc. Name	Case number (if known)	21-10795
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3.10	Nonpriority creditor's name and mailing address Bank of America Attn: Jose Diaz 101 E. Kenneday Dr., Ste. 500 Tampa, FL 33602 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Guaranty</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,672,863.24
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3.11	Nonpriority creditor's name and mailing address Barry Owen Co. Inc. 5625 Smithway Street Los Angeles, CA 90040 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$58,750.00
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3.12	Nonpriority creditor's name and mailing address Beach Club Promotions, Inc. 115 Business Centre Dr., Ste. 2 Ormond Beach, FL 32174 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$22,063.00
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3.13	Nonpriority creditor's name and mailing address Beach Mart, Inc. c/o Womble Bond Dickinson LLP Attn: S.F. Shaw and C.A. Burke, Esqs. 300 N. Greene Street, Ste. 1900 Greensboro, NC 27401 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Judgment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15,868,068.49
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3.14	Nonpriority creditor's name and mailing address Beachcombers International Attn: Pauline Prideaux 819 Bluecrab Road Newport News, VA 23606 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,594.00
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3.15	Nonpriority creditor's name and mailing address Best Value Products Attn: Henry Quintero 806 Summer Park Dr., Ste. 300 Stafford, TX 77477 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,779.00
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3.16	Nonpriority creditor's name and mailing address BlueCross/BlueShield of S.C. Mail Code: AA-G31 P.O. Box 6000 Columbia, SC 29260-6000 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,251.00
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Debtor	L&L Wings, Inc. Name	Case number (if known)	21-10795
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3.17	Nonpriority creditor's name and mailing address Bogue Banks Water Corp. 7412 Emerald Drive Emerald Isle, NC 28594 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$16.00
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3.18	Nonpriority creditor's name and mailing address Brainstorm Products, LLC 1011 S. Andreasen Dr., Ste. 100 Escondido, CA 92029 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$16,325.00
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3.19	Nonpriority creditor's name and mailing address Brass Reminders Company, Inc. P.O. Box 160 Keene, KY 40339-0160 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$32,906.00
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3.20	Nonpriority creditor's name and mailing address Brinks Inc. 50 Schilling Rd Hunt Valley, MD 21031 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,818.00
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3.21	Nonpriority creditor's name and mailing address Calhoun Sportswear 250 Bunting Road St. Catherines ON L2M 3Y1 Canada Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$32,365.00
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3.22	Nonpriority creditor's name and mailing address California Scene Publishing 7750 Formula Place San Diego, CA 92121 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,102.00
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3.23	Nonpriority creditor's name and mailing address CDW Corporation 200 N. Milwaukee Avenue Vernon Hills, IL 60061 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$122.00
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Debtor	L&L Wings, Inc. Name	Case number (if known)	21-10795
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3.24	Nonpriority creditor's name and mailing address City of Deerfield Beach 150 NE 2nd Avenue Deerfield Beach, FL 33441 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$76.00
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3.25	Nonpriority creditor's name and mailing address City of North Miami Beach P.O. Box 600427 North Miami Beach, FL 33160-0427 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$222.00
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3.26	Nonpriority creditor's name and mailing address Creative Wraps, Inc. 710 Kennedy Blvd. Somerdale, NJ 08083 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$48,249.00
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3.27	Nonpriority creditor's name and mailing address Cruz P.O. Box 1645 Murrels Inlet, SC 29576-1645 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$49,474.00
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3.28	Nonpriority creditor's name and mailing address Davine International Inc. 4774 Northgate Blvd. Myrtle Beach, SC 29577 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$742.00
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3.29	Nonpriority creditor's name and mailing address Delta Apparel 2750 Premier Pkwy., Ste. 100 Duluth, GA 30097 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$19,665.00
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3.30	Nonpriority creditor's name and mailing address Dorfman-Pacific Co. Inc. 2615 Boeing Way Stockton, CA 95206 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$17,189.00
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Debtor	L&L Wings, Inc. Name	Case number (if known)	21-10795
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3.31	Nonpriority creditor's name and mailing address DSD Express Smith Co. Distributing T-480 County Rd. 7 Liberty Center, OH 43532 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,184.00
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3.32	Nonpriority creditor's name and mailing address Duke Energy P.O. Box 1004 Charlotte, NC 28201-1004 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,072.00
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3.33	Nonpriority creditor's name and mailing address Edgewell Personal Care LLC 24234 Network Place Chicago, IL 60673 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$737.00
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3.34	Nonpriority creditor's name and mailing address Entire Select, Inc. 10857 NW 50th Street Fort Lauderdale, FL 33351 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,160.00
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3.35	Nonpriority creditor's name and mailing address Exist Inc. 1650 NW 23rd Ave., Bay A Fort Lauderdale, FL 33331 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$525,272.00
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3.36	Nonpriority creditor's name and mailing address Fantas-Eyes Inc. 385 Fifth Avenue 9th Floor New York, NY 10016 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,556.00
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3.37	Nonpriority creditor's name and mailing address Fashion Textile, Inc. 6574 N. State Road 7, Ste. 316 Pompano Beach, FL 33073 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$105,332.00
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3.38	Nonpriority creditor's name and mailing address Florida Wholesale 191 West Lake Drive Hallandale, FL 33009 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,220.00
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3.39	Nonpriority creditor's name and mailing address Forbes Candies, Inc. 1300 Taylor Farm Road Virginia Beach, VA 23453 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,448.00
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3.40	Nonpriority creditor's name and mailing address Forest Air 2990 32nd Street S. Saint Petersburg, FL 33712 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$358.00
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3.41	Nonpriority creditor's name and mailing address Franchise Tax Board P.O. Box 942857 Sacramento, CA 94257-0040 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,500.00
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3.42	Nonpriority creditor's name and mailing address Franklin Sports, Inc. 17 Campanelli Pkwy. Stoughton, MA 02072 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,109.00
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3.43	Nonpriority creditor's name and mailing address Fruit of the Loom 32791 Collection Center Drive Chicago, IL 60693-0327 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,414.00
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3.44	Nonpriority creditor's name and mailing address Full Circle Trends 1384 Broadway Room 1101 New York, NY 10018 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,016.00
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3.45	Nonpriority creditor's name and mailing address Fun Stuff, Inc. 2513 58th Street Hampton, VA 23661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$72,318.00
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3.46	Nonpriority creditor's name and mailing address Galveston County Tax Office Tax Assessor/Collector P.O. Box 1169 Galveston, TX 77553-1169 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,259.00
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3.47	Nonpriority creditor's name and mailing address Garden City Location LLC 666 Broadway, 8th Floor New York, NY 10012 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent arrears-</u> <u>2901 S. Hwy 17</u> <u>Murrells Inlet, SC</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$45,450.00
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3.48	Nonpriority creditor's name and mailing address Get A Gadget 6406 Burleson Road, Ste. 120 Austin, TX 78744 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$104,227.00
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3.49	Nonpriority creditor's name and mailing address Gottex Swimwear Brands 1441 Broadway, 26th Fl. New York, NY 10018 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,696.00
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3.50	Nonpriority creditor's name and mailing address Gulf Coast Panama Jack Attn: Brett Post 1411 Moylan Road Panama City Beach, FL 32407 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$27,830.00
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3.51	Nonpriority creditor's name and mailing address In Gear Fashions 4401 NW 167 Street Opa Locka, FL 33055 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$23,922.00
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Debtor	L&L Wings, Inc. <small>Name</small>	Case number (if known)	21-10795
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3.52	Nonpriority creditor's name and mailing address India Boutique 1854 NW 21st Street Miami, FL 33142 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,028.00
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3.53	Nonpriority creditor's name and mailing address Intersport Corp. 966 Sandhill Avenue Carson, CA 90746 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,585.00
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3.54	Nonpriority creditor's name and mailing address Island Shoppes LLC c/o Florida Bond & Mortgage Inc. 3696 N. Federal Hwy #200 Fort Lauderdale, FL 33308 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Guaranty for store lease located at 4232-4392 NE Ocean Blvd., Jensen Beach, FL</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.55	Nonpriority creditor's name and mailing address Island World Apparell Corp. 3620 Briggeman Drive Los Alamitos, CA 90720 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$159,979.00
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3.56	Nonpriority creditor's name and mailing address JD Yeatts & Sons Inc. Chesapeake Bay Ltd. Attn: Ken Johann P.O. Box 801 Danville, VA 24543-0801 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$21,440.00
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3.57	Nonpriority creditor's name and mailing address JGR Copa, LLC 5611 Dewey Street, #1 Hollywood, FL 33020 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$248,293.00
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3.58	Nonpriority creditor's name and mailing address Johnson Controls PO Box 371994 Pittsburgh, PA 15250-7994 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Alarm</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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Debtor	L&L Wings, Inc. <small>Name</small>	Case number (if known)	21-10795
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3.59	Nonpriority creditor's name and mailing address JOM Imports aka Gulf Coast Panama Jack 1411 Moylan Rd Panama City Beach, FL 32407 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$20,689.20
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3.60	Nonpriority creditor's name and mailing address Koppes Kokonuts 1031 Gant Road Graham, NC 27253 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$21,664.00
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3.61	Nonpriority creditor's name and mailing address Lucky 7 USA Inc. 275 Bryan Road Dania Beach, FL 33004 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$125,302.00
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3.62	Nonpriority creditor's name and mailing address Malone Family Trust, et al. c/o Eileen Chafetz, P.A. 4770 Biscayne Blvd. Suite 1400 Miami, FL 33137 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Guaranty for store lease at 201 Lincoln Rd., Miami Beach, FL</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.63	Nonpriority creditor's name and mailing address Miami Souvenirs 1600 NW 165th Street Miami Gardens, FL 33169 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$67,207.00
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3.64	Nonpriority creditor's name and mailing address Modern China Co. - Office 550 E. Ohio Avenue Sebring, OH 44672 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,090.00
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3.65	Nonpriority creditor's name and mailing address Morgan Lewis & Bockius, LLP Attn: Richard Taffet, Esq. 101 Park Avenue New York, NY 10178 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$266,202.00
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Debtor	L&L Wings, Inc. Name	Case number (if known)	21-10795
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3.66	Nonpriority creditor's name and mailing address My Word! 1 Aegean Drive Methuen, MA 01844 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,425.00
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3.67	Nonpriority creditor's name and mailing address New Generation Corporation Limited No. 5 Sheung Hei Street Room A, 2/F, Fuk Wo Ind. Bldg. San Po Kong Kowloon, China Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$142,522.00
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3.68	Nonpriority creditor's name and mailing address Ocean Drive 530 North Michigan Ave. Kenilworth, NJ 07033 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$105,989.00
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3.69	Nonpriority creditor's name and mailing address Ocean Place Retail VII LLC c/o JH Real Estate Partners Inc. 530 Newport Center Dr. #780 Newport Beach, CA 92660 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Guaranty for store lease at 401 Mission Avenue, Oceanside, CA</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.70	Nonpriority creditor's name and mailing address Onia LLC 10 East 40th Street 37th Floor New York, NY 10016 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$180,260.00
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3.71	Nonpriority creditor's name and mailing address Paramount Party Supplies 52 West 29th Street New York, NY 10001 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$797.00
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3.72	Nonpriority creditor's name and mailing address Pichincha 14262 SW 139th Street Miami, FL 33186 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$329.00
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Debtor	L&L Wings, Inc. <small>Name</small>	Case number (if known)	21-10795
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3.73	Nonpriority creditor's name and mailing address Popularity Products LLC 400 Federal Blvd. Carteret, NJ 07008 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$104,500.00
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3.74	Nonpriority creditor's name and mailing address Premier Investments USA, LLC Attn: David Katz 403 NE 2nd Ave., Unit A Hallandale, FL 33009 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$93,419.00
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3.75	Nonpriority creditor's name and mailing address PTL Enterprises Inc. d/b/a PTL One Attn: Gary Rollar, Jr. 1830 SW 2nd Street Pompano Beach, FL 33069 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$17,330.00
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3.76	Nonpriority creditor's name and mailing address Puka Creations 16840 South Main Gardena, CA 90248 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,947.00
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3.77	Nonpriority creditor's name and mailing address RH 2401 Ocean LLC c/o Adam Schmitt 7900 Glades Rd., Ste 540 Boca Raton, FL 33434 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Guaranty of lease for</u> <u>2601-2611 N. Ocean Ave., Riviera Beach, FL</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.78	Nonpriority creditor's name and mailing address Ruth Pietruszewski Martin County Tax Collector 3485 SE Willoughby Blvd. Stuart, FL 34994 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$30.00
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3.79	Nonpriority creditor's name and mailing address Scope Imports 6300 West Loop South, Ste. 100 Bellaire, TX 77401 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$16,326.00
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Debtor	L&L Wings, Inc. <small>Name</small>	Case number (if known)	21-10795
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3.80	Nonpriority creditor's name and mailing address Selective P.O. Box 782747 Philadelphia, PA 19178-2747 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,819.00
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3.81	Nonpriority creditor's name and mailing address Shaul & Meir Levy Partnership 666 Broadway, 8th Fl. New York, NY 10012 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent arrears-</u> <u>807 N. Lake Pk. Rd.</u> <u>Carolina Beach, NC</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,417.00
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3.82	Nonpriority creditor's name and mailing address Shaul & Meir Levy Partnership 666 Broadway, 8th Fl. New York, NY 10012 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Advance</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,758.92
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3.83	Nonpriority creditor's name and mailing address Shelterlogic Corp. 10981 Decatur Road Philadelphia, PA 19154 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$91,951.00
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3.84	Nonpriority creditor's name and mailing address SML BK Lincoln Collins, LLC 666 Broadway, 8th Fl. New York, NY 10012 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent arrears-</u> <u>201 Lincoln Rd.</u> <u>Miami Beach, FL</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$104,419.34
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3.85	Nonpriority creditor's name and mailing address SML Daytona Beach, LLC 666 Broadway, 8th Floor New York, NY 10012 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Advance</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$35,545.66
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3.86	Nonpriority creditor's name and mailing address SML Deerfield Beach, LLC 666 Broadway, 8th Fl. New York, NY 10012 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent arrears-</u> <u>2020 NE 2d St.</u> <u>Deerfield Beach, FL</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$63,802.00
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Debtor	L&L Wings, Inc. <small>Name</small>	Case number (if known)	21-10795
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3.87	Nonpriority creditor's name and mailing address SML Delray Beach, LLC 666 Broadway, 8th Fl. New York, NY 10012 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,449.00
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3.88	Nonpriority creditor's name and mailing address SML Jensen Beach, LLC 666 Broadway, 8th Fl. New York, NY 10012 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent arrears-</u> <u>4392 NE Ocean Blvd.</u> <u>Jensen Beach, FL</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,428.00
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3.89	Nonpriority creditor's name and mailing address SML Riviera Beach, LLC 666 Broadway 8th Fl. New York, NY 10012 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent arrears-</u> <u>2601-2611 N. Ocean Ave.</u> <u>Riviera Beach, FL</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$20,062.00
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3.90	Nonpriority creditor's name and mailing address Sony Ben-Moshe and Eli Ben-Moshe 5173 Waring Rd #32 San Diego, CA 92120 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$73,602.00
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3.91	Nonpriority creditor's name and mailing address Southeastern Freight Lines, Inc. P.O. Box 100104 Columbia, SC 29202-3104 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$44,307.00
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3.92	Nonpriority creditor's name and mailing address Souvenir Source LLC 2412 Grant Avenue Rockford, IL 61103 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$37,307.00
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3.93	Nonpriority creditor's name and mailing address Spectrum c/o Revco Solutions PO Box 2589 Columbus, OH 43216-2589 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,466.98
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Debtor	L&L Wings, Inc. <small>Name</small>	Case number (if known)	21-10795
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3.94	Nonpriority creditor's name and mailing address Spikeball Inc. 2045 W. Grand Ave., Ste. B Chicago, IL 60612-1577 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,566.00
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3.95	Nonpriority creditor's name and mailing address SS Handcrafter Art LLC 195 E. Waterlynn Rd. Mooresville, NC 28117 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,684.00
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3.96	Nonpriority creditor's name and mailing address State Board of Equalization P.O. Box 942879 Miami, FL 33178 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
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3.97	Nonpriority creditor's name and mailing address Strand Import & Dist. Inc. P.O. Box 16530 Surfside Beach, SC 29587-6530 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$313,211.00
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3.98	Nonpriority creditor's name and mailing address Sun Specs 9529 Stephen Decatur Hwy Berlin, MD 21811 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$18,496.00
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3.99	Nonpriority creditor's name and mailing address Sunshine Trading Company 1278 Surfside Industrial Park Park Drive Surfside Beach, SC 29576 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,374.00
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3.100	Nonpriority creditor's name and mailing address Surf 7 275 Bryan Road Dania, FL 33004 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$69,421.00
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Debtor	L&L Wings, Inc. Name	Case number (if known)	21-10795
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3.101	Nonpriority creditor's name and mailing address TD Bank, N.A. Attn: Charles Flint 9715 Gate Pkwy. North Jacksonville, FL 32246 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>PPP Loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,600,860.00
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3.102	Nonpriority creditor's name and mailing address Team Sourcing Company Ltd. ABC Heritage (5th Floor) 2 & 4 Jashmuddin Avenue, Sector 3 Uttara C/A Dhaka 1230, Bangladesh Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$112,887.00
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3.103	Nonpriority creditor's name and mailing address The Postcard Factory 2801 John Street Markham ON L3R 2Y8 Canada Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,563.00
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3.104	Nonpriority creditor's name and mailing address The Real Insect Co. Inc. 4661 Golden Foothill Pkwy., Ste. 105 El Dorado Hills, CA 95762 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,425.00
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3.105	Nonpriority creditor's name and mailing address Towel World 4880 N. Hiatus Road Sunrise, FL 33351 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$59,214.00
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3.106	Nonpriority creditor's name and mailing address Truist Bank Attn: Mary McElwain Asset Resolution Group 3750 Brookside Pkwy Ste 150 Alpharetta, GA 30022 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Guaranty</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$764,175.10
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3.107	Nonpriority creditor's name and mailing address Truist Bank Attn: Mary McElwain Asset Resolution Group 3750 Brookside Pkwy Ste 150 Alpharetta, GA 30022 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,927,958.00
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Debtor	L&L Wings, Inc. Name	Case number (if known)	21-10795
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3.108	Nonpriority creditor's name and mailing address Truist Bank Attn: Mary McElwain Asset Resolution Group 3750 Brookside Pkwy Ste 150 Alpharetta, GA 30022 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$549,848.35
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3.109	Nonpriority creditor's name and mailing address Ty Inc. 280 Chestnut Avenue Westmont, IL 60559 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$25,124.00
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3.110	Nonpriority creditor's name and mailing address Uber Freight LLC P.O. Box 74007178 Chicago, IL 60674-7178 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,920.00
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3.111	Nonpriority creditor's name and mailing address Ultimate Apparel Inc. 1359 Broadway, Ste. 814 New York, NY 10018 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,181.00
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3.112	Nonpriority creditor's name and mailing address United Community Bank Attn: Tony Young Special Assets Officer 946 Orleans Rd Charleston, SC 29407 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$469,667.77
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3.113	Nonpriority creditor's name and mailing address United Community Bank Attn: Tony Young Special Assets Officer 946 Orleans Rd Charleston, SC 29407 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,334,843.34
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3.114	Nonpriority creditor's name and mailing address United Community Bank Attn: Tony Young Special Assets Officer 946 Orleans Rd Charleston, SC 29407 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$628,892.74
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Debtor	L&L Wings, Inc. <small>Name</small>	Case number (if known)	21-10795
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3.115	Nonpriority creditor's name and mailing address United Community Bank Attn: Tony Young Special Assets Officer 946 Orleans Rd Charleston, SC 29407 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$462,553.05
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3.116	Nonpriority creditor's name and mailing address UPS Freight P.O. Box 650690 Dallas, TX 75265-0690 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$80.00
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3.117	Nonpriority creditor's name and mailing address V&L Crafts 188 Triple Diamond Blvd., Ste. A-7 Venice, FL 32475 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,042.00
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3.118	Nonpriority creditor's name and mailing address Vintage Summer 530 N. Michigan Ave Kenilworth, NJ 07033 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$34,776.00
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3.119	Nonpriority creditor's name and mailing address Vision Tex Fashion Concepts 1-B 9/13 Ground Floor Bilding Bin Haseeb Khan Nazimabad, No. 1, Karachi Pakistan Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,286.00
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3.120	Nonpriority creditor's name and mailing address VSF Corp. 2800 NW 125th Street Miami, FL 33167 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$104,688.00
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3.121	Nonpriority creditor's name and mailing address Warnaco Swimwear Inc. P.O. Box 643156 Pittsburgh, PA 15264-3156 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,768.00
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Debtor	L&L Wings, Inc. Name	Case number (if known)	21-10795
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3.122	Nonpriority creditor's name and mailing address Weeks Lerman 58-38 Page Place Maspeth, NY 11378-2235 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$384.00
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3.123	Nonpriority creditor's name and mailing address WestCoast Sunglasses, Inc. 625 S. Missouri Avenue Clearwater, FL 33756 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$49,558.00
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3.124	Nonpriority creditor's name and mailing address White By Mazuoz 2533 S. Park Road Pembroke Park, FL 33009 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$92,846.00
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3.125	Nonpriority creditor's name and mailing address World End Imports, Inc. P.O. Box 786 Cape May Court House, NJ 08210 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$18,560.00
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3.126	Nonpriority creditor's name and mailing address Young's Inc. 5073 Ann Arbor Road Dundee, MI 48131 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$86.00
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3.127	Nonpriority creditor's name and mailing address YRC Worldwide P.O. Box 93151 Chicago, IL 60673-3151 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,323.00
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3.128	Nonpriority creditor's name and mailing address ZAD Jewelry Attn: Bonnie Scheinberg 30 S. La Patera Lane, #9 Santa Barbara, CA 93117 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$660.00
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Debtor	L&L Wings, Inc. Name	Case number (if known)	21-10795
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3.129	Nonpriority creditor's name and mailing address Zan Headgear, Inc. 9401 Waples St., Ste. 120 San Diego, CA 92121 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$166.00
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Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	ABC/Amega 500 Seneca Street Ste 400 Buffalo, NY 14204-1963	Line <u>3.58</u> <input type="checkbox"/> Not listed. Explain ____	—
4.2	Bordson Law Group Attn: Miranda Bordson 350 10th Ave Ste 1000 San Diego, CA 92101	Line <u>3.90</u> <input type="checkbox"/> Not listed. Explain ____	—
4.3	Hilldun Corporation 225 West 35th St., 10th Fl. New York, NY 10001	Line <u>3.70</u> <input type="checkbox"/> Not listed. Explain ____	—
4.4	Johnson Controls 10405 Crosspoint Blvd Indianapolis, IN 46256	Line <u>3.58</u> <input type="checkbox"/> Not listed. Explain ____	—
4.5	Rosenthal & Rosenthal Inc. Attn: Deborah Jones/Elliott Levy 1370 Broadway New York, NY 10018	Line <u>3.57</u> <input type="checkbox"/> Not listed. Explain ____	—
4.6	Spectrum 4145 S. Salkenberg Rd Riverview, FL 33578-8652	Line <u>3.93</u> <input type="checkbox"/> Not listed. Explain ____	—
4.7	Sterling National Bank Factoring & Trade Finance Attn: Nydia Velez/Benji Sarjoo P.O. Box 75359 Chicago, IL 60675-5359	Line <u>3.34</u> <input type="checkbox"/> Not listed. Explain ____	—
4.8	The CIT Group Attn: Corey Lehr, VP Commercial Services, Inc. 11 West 42nd Street, 11th Fl. New York, NY 10036	Line <u>3.36</u> <input type="checkbox"/> Not listed. Explain ____	—
4.9	The CIT Group Attn: Corey Lehr, VP Commercial Services, Inc. 11 West 42nd Street, 11th Fl. New York, NY 10036	Line <u>3.73</u> <input type="checkbox"/> Not listed. Explain ____	—

Debtor	L&L Wings, Inc. Name	Case number (if known)	21-10795
	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.10	The CIT Group Attn: Corey Lehr, VP Commercial Services, Inc. 11 West 42nd Street, 11th Fl. New York, NY 10036	Line <u>3.124</u> <input type="checkbox"/> Not listed. Explain _____	—
4.11	The CIT Group Attn: Corey Lehr, VP Commercial Services, Inc. 11 West 42nd Street, 11th Fl. New York, NY 10036	Line <u>3.68</u> <input type="checkbox"/> Not listed. Explain _____	—
4.12	The CIT Group Attn: Corey Lehr, VP Commercial Services, Inc. 11 West 42nd Street, 11th Fl. New York, NY 10036	Line <u>3.118</u> <input type="checkbox"/> Not listed. Explain _____	—
4.13	The CIT Group Attn: Corey Lehr, VP Commercial Services, Inc. 11 West 42nd Street, 11th Fl. New York, NY 10036	Line <u>3.44</u> <input type="checkbox"/> Not listed. Explain _____	—
4.14	The CIT Group Attn: Corey Lehr, VP Commercial Services, Inc. 11 West 42nd Street, 11th Fl. New York, NY 10036	Line <u>3.79</u> <input type="checkbox"/> Not listed. Explain _____	—
4.15	Wells Fargo Bank, N.A. Attn: Christine Hocker 14241 Dallas Parkway, Ste. 900 Dallas, TX 75254-2936	Line <u>3.35</u> <input type="checkbox"/> Not listed. Explain _____	—
4.16	Wells Fargo Bank, N.A. Attn: Christine Hocker 14241 Dallas Parkway, Ste. 900 Dallas, TX 75254-2936	Line <u>3.51</u> <input type="checkbox"/> Not listed. Explain _____	—
4.17	White Oak Commercial Finance Attn: David Katz P.O. Box 100895 Atlanta, GA 30384-4174	Line <u>3.74</u> <input type="checkbox"/> Not listed. Explain _____	—
4.18	White Oak Commercial Finance Attn: David Katz P.O. Box 100895 Atlanta, GA 30384-4174	Line <u>3.98</u> <input type="checkbox"/> Not listed. Explain _____	—

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1
5b. Total claims from Part 2

5c. Total of Parts 1 and 2
Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ <u>123,441.21</u>
5b. +	\$ <u>32,920,798.18</u>
5c.	\$ <u>33,044,239.39</u>

Fill in this information to identify the case:

Debtor name **L&L Wings, Inc.**

United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF NEW YORK**

Case number (if known) **21-10795**

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B). *Property*

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest **Lease for 100 S. Morehead Ave., Atlantic Beach, NC**

State the term remaining **Month to Month**

List the contract number of any government contract

**100 South Morehead Corp.
666 Broadway, 8th Floor
New York, NY 10012**

2.2. State what the contract or lease is for and the nature of the debtor's interest **Lease for 106A N. New River Dr., Surf City, NC**

State the term remaining **Through 5/31/26**

List the contract number of any government contract

**106 New River Drive LLC
530 N. Michigan Avenue
Kenilworth, NJ 07033**

2.3. State what the contract or lease is for and the nature of the debtor's interest **Lease for 349 Johnson Street, Hollywood Beach, FL**

State the term remaining **Through 8/31/21**

List the contract number of any government contract

**A1A Corner of Johnson St. RE Corp.
666 Broadway, 8th Floor
New York, NY 10012**

2.4. State what the contract or lease is for and the nature of the debtor's interest **Independent Director Agreement**

State the term remaining **N/A**

List the contract number of any government contract

Bernard A. Katz

Debtor 1 **L&L Wings, Inc.**

Case number (if known) **21-10795**

First Name Middle Name Last Name

Additional Page if You Have More Contracts or Leases

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.5. State what the contract or lease is for and the nature of the debtor's interest **Lease for armored car service**

State the term remaining **3 years**

List the contract number of any government contract

**Brinks fka Dunbar Armored Inc.
50 Schilling Rd
Hunt Valley, MD 21031**

2.6. State what the contract or lease is for and the nature of the debtor's interest **Lease for 8103 Emerald Dr., Emerald Isle, NC**

State the term remaining **Through 1/31/24**

List the contract number of any government contract

**Coastal Land Ventures
8201 Emerald Drive
Emerald Isle, NC 28594**

2.7. State what the contract or lease is for and the nature of the debtor's interest **IT service and support agreement**

State the term remaining

List the contract number of any government contract

**DXC Eclipse (USA) LLC/Enavate
1775 Tysons Blvd.
Mc Lean, VA 22102**

2.8. State what the contract or lease is for and the nature of the debtor's interest **Lease for 4918 Seawall Blvd., Galveston, TX**

State the term remaining **Through 10/31/25**

List the contract number of any government contract

**Elm at Seaside LTD
c/o Premier Capital Group
Attn: Joseph T. Joseph
1605 S. Parkway Blvd. Ste 200
Sugar Land, TX 77478**

2.9. State what the contract or lease is for and the nature of the debtor's interest **Lease for 2901 S Kings Hwy, Murrell's Inlet, SC**

State the term remaining **Month to Month**

List the contract number of any government contract

**Garden City Location LLC
666 Broadway, 8th Floor
New York, NY 10012**

2.10. State what the contract or lease is for and the nature of the debtor's interest **Lease for 529 Seawall Blvd., Galveston, TX**

State the term remaining **Through 8/31/26**

List the contract number of any government contract

**Karen E. Davis
56 LeBrun Court West
Galveston, TX 77550**

Debtor 1 **L&L Wings, Inc.**

First Name

Middle Name

Last Name

Case number (if known) **21-10795**

Additional Page if You Have More Contracts or Leases

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

government contract

2.11. State what the contract or lease is for and the nature of the debtor's interest **Car lease**

State the term remaining **8/9/21**

List the contract number of any government contract

**Land Rover Financial Group
PO Box 78058
Phoenix, AZ 85062**

2.12. State what the contract or lease is for and the nature of the debtor's interest **Car lease**

State the term remaining **7/9/22**

List the contract number of any government contract

**Land Rover Financial Group
PO Box 78058
Phoenix, AZ 85062**

2.13. State what the contract or lease is for and the nature of the debtor's interest **Truck lease**

State the term remaining **2/1/22**

List the contract number of any government contract

**Penske Truck Leasing Co.
PO Box 563
Reading, PA 19603**

2.14. State what the contract or lease is for and the nature of the debtor's interest **Postage machine**

State the term remaining **12/1/21**

List the contract number of any government contract

**Quient/Neopost
c/o Mail Finance Inc.
478 Wheelers Farm Rd.
Milford, CT 06461**

2.15. State what the contract or lease is for and the nature of the debtor's interest **Lease for 16850 Collins Ave., Sunny Isle Beach, FL**

State the term remaining **Through 12/31/23**

List the contract number of any government contract

**R.K. Associates #2, Inc.
17100 Collins Ave. Suite 225
North Miami Beach, FL 33160**

2.16. State what the contract or lease is for and the nature of the debtor's interest **store licensed music**

**Rockbot Inc.
1308 Broadway
Oakland, CA 94612**

Debtor 1 **L&L Wings, Inc.**

First Name

Middle Name

Last Name

Case number (if known) **21-10795**

Additional Page if You Have More Contracts or Leases

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

State the term remaining **quarter to quarter**

List the contract number of any government contract _____

2.17. State what the contract or lease is for and the nature of the debtor's interest **Lease for 7600 N Kings Hwy, Myrtle Beach, SC**

State the term remaining **Month to Month**

List the contract number of any government contract _____

**Shaul & Meir Levy Partnership
666 Broadway, 8th Fl.
New York, NY 10012**

2.18. State what the contract or lease is for and the nature of the debtor's interest **Lease for 400 Pointsettia Blvd., Clearwater Beach, FL**

State the term remaining **Month to Month**

List the contract number of any government contract _____

**Shaul & Meir Levy Partnership
666 Broadway, 8th Fl.
New York, NY 10012**

2.19. State what the contract or lease is for and the nature of the debtor's interest **Lease for 6705 Gulf Blvd., St. Petersburg Beach, FL**

State the term remaining **Through 1/31/24**

List the contract number of any government contract _____

**Shaul & Meir Levy Partnership
666 Broadway, 8th Fl.
New York, NY 10012**

2.20. State what the contract or lease is for and the nature of the debtor's interest **Lease for 200 W. Fort Macon Blvd., Atlantic Beach, NC**

State the term remaining **Month to Month**

List the contract number of any government contract _____

**Shaul & Meir Levy Partnership
666 Broadway, 8th Fl.
New York, NY 10012**

2.21. State what the contract or lease is for and the nature of the debtor's interest **Lease for 807 North Lake Park Blvd., Carolina Beach, NC**

State the term remaining **Month to Month**

List the contract number of any government contract _____

**Shaul & Meir Levy Partnership
666 Broadway, 8th Fl.
New York, NY 10012**

Debtor 1 **L&L Wings, Inc.**

Case number (if known) **21-10795**

First Name Middle Name Last Name

Additional Page if You Have More Contracts or Leases

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.22. State what the contract or lease is for and the nature of the debtor's interest **Lease for 1014 N. Lake Park Blvd., Carolina Beach,, NC**

State the term remaining **Through 10/31/24**

List the contract number of any government contract

**Shaul & Meir Levy Partnership
666 Broadway, 8th Fl.
New York, NY 10012**

2.23. State what the contract or lease is for and the nature of the debtor's interest **Lease for 82 S. Lumina Ave., Wrightsville Beach, NC**

State the term remaining **through 6/30/21**

List the contract number of any government contract

**Shaul & Meir Levy Partnership
666 Broadway, 8th Fl.
New York, NY 10012**

2.24. State what the contract or lease is for and the nature of the debtor's interest **Lease for 3210 Holden Beach Rd. S., Holden Beach, NC**

State the term remaining **Through 2/28/24**

List the contract number of any government contract

**Shaul & Meir Levy Partnership
666 Broadway, 8th Fl.
New York, NY 10012**

2.25. State what the contract or lease is for and the nature of the debtor's interest **Sublease for 201 Lincoln Rd., Miami Beach, FL**

State the term remaining **Through 10/31/22**

List the contract number of any government contract

**SML BK Lincoln Collins, LLC
666 Broadway, 8th Floor
New York, NY 10012**

2.26. State what the contract or lease is for and the nature of the debtor's interest **Lease for 666 Broadway, 3rd Floor, NY,, NY**

State the term remaining **Through 12/31/24**

List the contract number of any government contract

**SML Broadway 3, LLC
666 Broadway, 8th Floor
New York, NY 10012**

2.27. State what the contract or lease is for and the nature of the debtor's interest **Lease for 666 Broadway, 8th Floor, NY, NY**

State the term remaining **Through 6/30/26**

List the contract number of any

**SML Broadway 8, LLC
666 Broadway, 8th Floor
New York, NY 10012**

Debtor 1 **L&L Wings, Inc.**

First Name

Middle Name

Last Name

Case number (if known) **21-10795**

Additional Page if You Have More Contracts or Leases

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

government contract

2.28. State what the contract or lease is for and the nature of the debtor's interest

Sublease for 607 N. Atlantic Ave., Daytona Beach, FL

State the term remaining

Month to Month

List the contract number of any government contract

**SML Daytona Beach, LLC
666 Broadway, 8th Floor
New York, NY 10012**

2.29. State what the contract or lease is for and the nature of the debtor's interest

Lease for 2020 NE 2d Street, Deerfield Beach, FL

State the term remaining

Through 9/30/24

List the contract number of any government contract

**SML Deerfield Beach, LLC
666 Broadway, 8th Floor
New York, NY 10012**

2.30. State what the contract or lease is for and the nature of the debtor's interest

Sublease for 512 E. Atlantic Ave., Delray Beach, FL

State the term remaining

Month to Month

List the contract number of any government contract

**SML Delray Beach, LLC
666 Broadway, 8th Floor
New York, NY 10012**

2.31. State what the contract or lease is for and the nature of the debtor's interest

Sublease for 4392 NE Ocean Blvd., Jensen Beach, FL

State the term remaining

Month to Month

List the contract number of any government contract

**SML Jensen Beach, LLC
666 Broadway, 8th Floor
New York, NY 10012**

2.32. State what the contract or lease is for and the nature of the debtor's interest

Sublease for 2601-2611 N. Ocean Ave., Riviera Beach, FL

State the term remaining

Month to Month

List the contract number of any government contract

**SML Riviera Beach, LLC
666 Broadway 8th Floor
New York, NY 10012**

2.33. State what the contract or lease is for and the nature of the debtor's interest

Sublease for 401 Mission Ave., Oceanside, CA

**SML Wings Oceanside LLC
666 Broadway, 8th Floor
New York, NY 10012**

Debtor 1 **L&L Wings, Inc.**

First Name

Middle Name

Last Name

Case number (if known) **21-10795**

Additional Page if You Have More Contracts or Leases

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

State the term remaining **Month to Month**

List the contract number of any government contract _____

2.34. State what the contract or lease is for and the nature of the debtor's interest **Lease for 4948 Newport Ave., San Diego, CA**

State the term remaining **Through 9/30/24**

List the contract number of any government contract _____

**Sony Ben-Moshe & Eli Ben-Moshe
5173 Waring Rd # 32
San Diego, CA 92120**

2.35. State what the contract or lease is for and the nature of the debtor's interest **Lease for 3136 Mission Blvd, San Diego, CA**

State the term remaining **Through 10/31/24**

List the contract number of any government contract _____

**Symphony Asset Pool XVI LLC
c/o Pacifica Real Estate Services
Attn: Mirko Marrone
5505 Cancha De Golf
Rancho Santa Fe, CA 92091**

2.36. State what the contract or lease is for and the nature of the debtor's interest **Sublease for 2800 NW 125th Street, Miami, FL**

State the term remaining **Through 1/31/22**

List the contract number of any government contract _____

**V.S.F. LLC
666 Broadway, 8th Floor
New York, NY 10012**

2.37. State what the contract or lease is for and the nature of the debtor's interest **Lease for 9700 N Kings Hwy, Myrtle Beach, SC**

State the term remaining **Through 3/31/25**

List the contract number of any government contract _____

**Watson's Shopping Center LLC
c/o Barnett Wright
1304B Azalea Court
Myrtle Beach, SC 29577**

Fill in this information to identify the case:

Debtor name **L&L Wings, Inc.**United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF NEW YORK**Case number (if known) **21-10795**☐ Check if this is an amended filingOfficial Form 206H
Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

Name

Mailing Address

Name

Check all schedules that apply:

2.1 **100 South
Morehead
Avenue Corp.****Truist Bank**☐ D _____
☒ E/F **3.108**
☐ G _____2.2 **A1A Corner of
Johnson Real
Estate Corp.****Bank of America**☐ D _____
☒ E/F **3.10**
☐ G _____2.3 **Bond Street
Levy, LLC****TD Bank, N.A.**☒ D **2.5**
☐ E/F _____
☐ G _____2.4 **Garden City
Location, LLC****TD Bank, N.A.**☒ D **2.5**
☐ E/F _____
☐ G _____2.5 **Meir Levy, Shaul
Levy, L&L Wings,
Inc.****TD Bank, N.A.**☒ D **2.5**
☐ E/F _____
☐ G _____

Debtor **L&L Wings, Inc.**

Case number (if known) **21-10795**

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.6	Shaul and Meir Levy Partnership	Truist Bank	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.106</u> <input type="checkbox"/> G _____
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2.7	Shaul and Meir Levy Partnership	TD Bank, N.A.	<input checked="" type="checkbox"/> D <u>2.5</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.8	Shaul and Meir Levy Partnership	TD Bank, N.A.	<input checked="" type="checkbox"/> D <u>2.5</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.9	Shaul and Meir Levy Partnership	United Community Bank	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.112</u> <input type="checkbox"/> G _____
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2.10	Shaul and Meir Levy Partnership	United Community Bank	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.114</u> <input type="checkbox"/> G _____
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2.11	Shaul and Meir Levy Partnership	United Community Bank	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.115</u> <input type="checkbox"/> G _____
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2.12	Shaul and Meir Levy Partnership	666 Broadway 8th Floor New York, NY 10012	United Community Bank	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.115</u> <input type="checkbox"/> G _____
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2.13	SML BK Lincoln Collins, LLC	Malone Family Trust, et al.	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.62</u> <input type="checkbox"/> G _____
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Debtor **L&L Wings, Inc.**

Case number (if known) **21-10795**

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.14	SML Broadway 8 LLC	TD Bank, N.A.	<input checked="" type="checkbox"/> D 2.5 <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.15	SML Deerfield Beach, LLC	Truist Bank	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F 3.107 <input type="checkbox"/> G _____
2.16	SML Jensen Beach LLC	Island Shoppes LLC	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F 3.54 <input type="checkbox"/> G _____
2.17	SML Wings Oceanside LLC	Ocean Place Retail VII LLC	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F 3.69 <input type="checkbox"/> G _____
2.18	SML Wings Riviera Beach LLC	RH 2401 Ocean LLC	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F 3.77 <input type="checkbox"/> G _____

Fill in this information to identify the case:

Debtor name L&L Wings, Inc.
United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK
Case number (if known) 21-10795

☐ Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/19

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. Gross revenue from business

☐ None.

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

Sources of revenue
Check all that apply

Gross revenue
(before deductions and exclusions)

For prior year:
From 7/01/2020 to **Filing Date**

☒ Operating a business
☐ Other _____

\$32,027,140.65

For year before that:
From 7/01/2019 to 6/30/2020

☒ Operating a business
☐ Other _____

\$32,360,806.00

For the fiscal year:
From 7/01/2018 to 6/30/2019

☒ Operating a business
☐ Other _____

\$34,516,954.00

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None.

Description of sources of revenue

Gross revenue from each source
(before deductions and exclusions)

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None.

Creditor's Name and Address

Dates

Total amount of value

Reasons for payment or transfer
Check all that apply

Debtor **L&L Wings, Inc.**Case number (if known) **21-10795**

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. See attached		\$0.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
4.1. See attached		\$0.00	

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

Creditor's name and address	Describe of the Property	Date	Value of property
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6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
-----------------------------	---	-----------------------	--------

Part 3: Legal Actions or Assignments**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1. Beach Mart, Inc. v. L&L Wings, Inc. 2:11-cv-00044-FL and 2:14-cv-00052-FL		US District Court, Eastern Dist. of N.C.	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None**Part 4: Certain Gifts and Charitable Contributions**

Debtor **L&L Wings, Inc.**Case number (if known) **21-10795**

9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000

☒ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
------------------------------	---	-------------	-------

Part 5: Certain Losses

10. All losses from fire, theft, or other casualty within 1 year before filing this case.

☒ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss <small>If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).</small>	Dates of loss	Value of property lost
--	--	---------------	------------------------

Part 6: Certain Payments or Transfers

11. Payments related to bankruptcy

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1. Davidoff Hutcher & Citron LLP 605 Third Avenue New York, NY 10158		12/7/2020	\$25,000.00

Email or website address

Who made the payment, if not debtor?

11.2. Davidoff Hutcher & Citron LLP 605 Third Avenue New York, NY 10158		1/15/21	\$125,000.00
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Email or website address

Who made the payment, if not debtor?

Debtor **L&L Wings, Inc.**

Case number (if known) **21-10795**

	Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.3.	Davidoff Hutcher & Citron LLP		April 22, 2021	\$50,000.00

Email or website address

Who made the payment, if not debtor?

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.
Do not include transfers already listed on this statement.

☒ None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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13. Transfers not already listed on this statement

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
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Part 7: Previous Locations

14. Previous addresses

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☒ Does not apply

Address	Dates of occupancy From-To
---------	-------------------------------

Part 8: Health Care Bankruptcies

15. Health Care bankruptcies

Is the debtor primarily engaged in offering services and facilities for:
- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

- ☒ No. Go to Part 9.
☐ Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
---------------------------	--	---

Part 9: Personally Identifiable Information

16. Does the debtor collect and retain personally identifiable information of customers?

- ☒ No.
☐ Yes. State the nature of the information collected and retained.

Debtor **L&L Wings, Inc.**Case number (if known) **21-10795****17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?**

- ☒ No. Go to Part 10.
- ☐ Yes. Does the debtor serve as plan administrator?

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?
Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☒ None

Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
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19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Do you still have it?
---	--	-----------------------------	-----------------------

20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☐ None

Facility name and address	Names of anyone with access to it	Description of the contents	Do you still have it?
Yandle Mobile Storage 6449 Ocean Hwy West Ocean Isle Beach, NC 28469	Regional Manager	Old equipment	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None**Part 12: Details About Environment Information**

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Debtor **L&L Wings, Inc.**Case number (if known) **21-10795**

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No.
☐ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
---------------------------	-------------------------------------	--------------------	----------------

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☒ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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Part 13: Details About the Debtor's Business or Connections to Any Business

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- ☒ None

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN. Dates business existed
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26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

- ☒ None

Name and address	Date of service From-To
------------------	----------------------------

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

- ☐ None

Name and address	Date of service From-To
------------------	----------------------------

26b.1. **Webster Rogers LLP**

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

- ☐ None

Name and address	If any books of account and records are unavailable, explain why
------------------	---

Debtor **L&L Wings, Inc.**

Case number (if known) **21-10795**

Name and address

If any books of account and records are unavailable, explain why

26c.1. **Debtor**
666 Broadway, 8th Floor
New York, NY 10012

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☐ None

Name and address

26d.1. **TD Bank, various other institutions**

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☐ No

☒ Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory

Date of inventory

The dollar amount and basis (cost, market, or other basis) of each inventory

27.1 **Various**

Name and address of the person who has possession of inventory records

Debtor

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Ariel Levy	666 Broadway, 8th Floor New York, NY 10012	President	
Name	Address	Position and nature of any interest	% of interest, if any
Meir Levy	666 Broadway, 8th Floor New York, NY 10012	shareholder	50%
Name	Address	Position and nature of any interest	% of interest, if any
Shaul Levy	666 Broadway, 8th Floor New York, NY 10012	shareholder	50%
Name	Address	Position and nature of any interest	% of interest, if any
Bernard A. Katz	c/o BAK Advisors, Inc. 626 S. State Street Newtown, PA 18940	Independent director	

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

☐ No

☒ Yes. Identify below.

Debtor **L&L Wings, Inc.**Case number (if known) **21-10795**

Name	Address	Position and nature of any interest	Period during which position or interest was held
Meir Levy & Shaul Levy	666 Broadway, 8th Floor New York, NY 10012	President, secretary	

30. **Payments, distributions, or withdrawals credited or given to insiders**

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- ☐ No
☒ Yes. Identify below.

	Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1	Shaul Levy 666 Broadway, 8th Floor New York, NY 10012	609,202.99		Compensation
	Relationship to debtor shareholder			
30.2	Meir Levy 666 Boradway, 8th Floor New York, NY 10012	716,897.13		Compensation
	Relationship to debtor shareholder			
30.3	Ariel Levy	\$564,599.88		Compensation
	Relationship to debtor President			
30.4	Gabriel Levy	\$61,381.10		Compensation
	Relationship to debtor Employee			
30.5	Ilanit Levy	\$78,300		Compensation
	Relationship to debtor Employee			
30.6	Allegra Russo	\$46,678.86		Compensation
	Relationship to debtor Former employee			

Debtor **L&L Wings, Inc.**

Case number (if known) **21-10795**

	Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.7	Daniella Godina	\$35,100		Compensation
	Relationship to debtor Former employee			
30.8	Mollie Ben-Haim	\$46,678.86		Compensation
	Relationship to debtor Former employee			
30.9	Rachel Moss	\$46,678.86		Compensation
	Relationship to debtor Former employee			
30.10	Bernard Katz	\$57,000		Independent director fees
	Relationship to debtor Independent Director			

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☒ No
☐ Yes. Identify below.

Name of the parent corporation

Employer Identification number of the parent corporation

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☒ No
☐ Yes. Identify below.

Name of the pension fund

Employer Identification number of the parent corporation

Debtor L&L Wings, Inc.

Case number (if known) 21-10795

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on May 24, 2021

/s/ Ariel Levy

Signature of individual signing on behalf of the debtor

Ariel Levy

Printed name

Position or relationship to debtor President

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

☒ No

☐ Yes

United States Bankruptcy Court
Southern District of New York

In re **L&L Wings, Inc.**

Debtor(s)

Case No. **21-10795**

Chapter **11**

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept	\$	125,000.00
Prior to the filing of this statement I have received	\$	125,000.00
Balance Due	\$	0.00

2. \$ **1,738.00** of the filing fee has been paid.
3. The source of the compensation paid to me was:
☒ Debtor ☐ Other (specify):
4. The source of compensation to be paid to me is:
☒ Debtor ☐ Other (specify):
5. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.
6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
d. [Other provisions as needed]
7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:
Representation of the debtor(s) in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding or contested matter.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

May 24, 2021

Date

/s/ Robert L. Rattet

Robert L. Rattet

Signature of Attorney

Davidoff Hutcher & Citron LLP

605 Third Avenue

34th Floor

New York, NY 10158

212 557 7200 Fax: 212 286 1884

rlr@dhclegal.com

Name of law firm